

07hr_SC-Ed_Appt_Mulligan_pt01



Details: Thomas Mulligan

(FORM UPDATED: 07/12/2010)

WISCONSIN STATE LEGISLATURE ... PUBLIC HEARING - COMMITTEE RECORDS

2007-08

(session year)

Senate

(Assembly, Senate or Joint)

Committee on ... Education (SC-Ed)

COMMITTEE NOTICES ...

- Committee Reports ... **CR**
- Executive Sessions ... **ES**
- Public Hearings ... **PH**
- Record of Comm. Proceedings ... **RCP**

INFORMATION COLLECTED BY COMMITTEE FOR AND AGAINST PROPOSAL

- Appointments ... **Appt**
- Clearinghouse Rules ... **CRule**
- Hearing Records ... bills and resolutions
 - (**ab** = Assembly Bill) (**ar** = Assembly Resolution) (**ajr** = Assembly Joint Resolution)
 - (**sb** = Senate Bill) (**sr** = Senate Resolution) (**sjr** = Senate Joint Resolution)
- Miscellaneous ... **Misc**

MB

State of Wisconsin\Government Accountability Board

Ethics & Accountability Division
44 East Mifflin, Ste. 601
Madison, WI 53703
Phone (608) 266-8123
Fax (608) 264-9319
E-mail: ethics@ethics.state.wi.us



KEVIN J. KENNEDY
Director and General Counsel

3/19/2008

Senate Committee Members:

The attached Statement of Economic Interests is provided with regard to the individual's nomination to a State Public Office by Governor Jim Doyle.

Sincerely,
STATE OF WISCONSIN GOVERNMENT
ACCOUNTABILITY BOARD

Nominee: **Mulligan, Thomas**
Nomination Date: 3/3/2008

Mail or fax to: Wisconsin Government Accountability Board, 44 E. Mifflin St., Suite 601, Madison, WI 53703-1303, (608) 266-8115

Statement of Economic Interests

Filed in 2008 for calendar year 2007

Name:

Mulligen, Thomas C.

(last name, first name & initial)

State

position:

(held or sought)

DPI: Professional Standards Council

(include agency, division, branch or district, if applicable)

Wisconsin Government Accountability Board
Ethics & Accountability Division

FOR EXPLANATIONS, EXAMPLES AND EXCEPTIONS SEE THE INSTRUCTIONS OR VISIT OUR WEBSITE AT <http://ethics.state.wi.us>.
Still have questions? For priority service send an e-mail to: ethics@ethics.state.wi.us; otherwise leave a detailed message at (608) 266-8115.
Attach additional pages as needed.

Part A

Information current as of

March 3, 2008

(insert nomination/appointment date here)

1. INVESTMENTS.

a) Funds Available in Wisconsin Deferred Compensation Program. These funds are available to participants in the Wisconsin Deferred Compensation program and many of them are also available for direct purchase, independent of that program. If you held an investment of \$5,000 or more in any of these funds – either directly or through the program -- please check the appropriate box.

Profile Series	"✓" one			"✓" one			"✓" one	
	\$5,000 to \$50,000	More than \$50,000		\$5,000 to \$50,000	More than \$50,000		\$5,000 to \$50,000	More than \$50,000
Vanguard Retirement 2045 Fund			Small Cap BGI Russell 2000 Index – Collective T			Bond BGI US Debt Index Fund – Collective W		
Vanguard Retirement 2035 Fund			DFA US Micro Cap Fund			Federated US Government Securities 2-5 Yr.		
Vanguard Retirement 2025 Fund			Mid Cap BGI Mid Cap Equity Index – Collective W			Vanguard Long-Term Investment Grade Adm		
Vanguard Retirement 2015 Fund			T. Rowe Price Mid Cap Growth Fund			Money Market Vanguard Admiral Treasury Money Market		
Vanguard Target Retirement Income Fund			Large Cap Calvert Social Investment Equity I			Fixed Returns for the Quarter Stable Value Fund		
International American Funds Euro Pacific R5 BGI EAFE Equity Index – Collective W			Fidelity Contra Fund			FDIC Bank Option		
			Vanguard Institutional Index Fund Plus					
			Vanguard Wellington Fund - Admiral					

b) Other Investments. List stocks, bonds, limited partnerships, Wisconsin governmental securities, and mutual and money market funds in which you and your family's interest was valued at \$5,000 or more.

Name of security	Type of security – "✓" one					Amount – "✓" one	
	Stock/option/futures	Bond	Limited partnership	Wisconsin governmental security	Mutual or money market fund	\$5,000 to \$50,000	More than \$50,000
JPMorgan					X		X
Edvest					X	X	
ING Investment					X	X	
Thrivent Financial					X	X	

2. **BUSINESS ACTIVITIES.** List businesses, farms, rental, commercial, and income-producing real estate; and business activities in which you or your family had at least a 10% or greater interest.

a) **Enterprise(s) operating under a business or trade name, list here.**

Name of business	Municipality or Town	County	State	Describe nature of business

b) **Enterprise(s) NOT operating under a business or trade name, list here.**

Street address or fire number	Municipality or Town	County	State	Describe nature of business

3. **COMMERCIAL CUSTOMERS, CLIENTS, AND TENANTS.** For each unincorporated business, subchapter S corporation, service corporation (SC), limited liability company (LLC), partnership, or income-producing real estate reported in Item 2, list businesses, organizations, and lobbyists that paid the enterprise \$1,000 or more in calendar year 2007.

Check if the organization authorized you to represent it in its dealings with others as an attorney-at-law, agent, spokesperson, or representative.

Businesses, organizations, lobbyists that were customers, clients, or tenants	City	State	✓

4. **BUSINESS PARTNERS.** For each enterprise reported under Item 2, list its co-owners, partners, officers, and directors (other than yourself), unless the information is already registered with the Wisconsin Department of Financial Institutions.

Business	Partners, or officers and directors	City	State

5. **NON-COMMERCIAL REAL ESTATE.** List the specific location of WISCONSIN REAL ESTATE in which you or your family had an interest (except your principal residence and real estate whose location you listed in item 2).

LOCATION OF PROPERTY			NATURE OF INTEREST (own, lease, option, easement, land contract)
Street address or fire number	Municipality Or Town	County	

6. **OFFICERS AND DIRECTORS.** List organizations of which you or a family member was an officer or director (unless listed in Item #2.)

Business or organization	City	State	Position

7. AGENT, REPRESENTATIVE OR SPOKESPERSON. List each organization that authorized you or a family member to represent it in its dealings with others as an attorney-at-law, agent, spokesperson, or representative (unless listed in item 2, 3, or 6.)

Business or organization	City	State

8. CREDITORS. List creditors to which you or your family owed \$5,000 or more.

Creditor	City	State	one	
			\$50,000 or less	More than \$50,000
Visa: Disney Card	Los Angeles	CA	X	
Fifth Third Bank	Cincinnati	OH		X
Associated Mortgage	Stevens Point	WI		X

Part B

For calendar year 2007

9. EMPLOYERS. List your and your family's EMPLOYERS (\$1,000 or more of income) in 2007.

Name of employer (If State of Wisconsin, identify agency or institution)	City	State	Nature of employer's business
West Allis - West Milwaukee School Dist.	West Allis	WI	School District
West Bend School District	West Bend	WI	School District
Wisconsin Dept Public Instruction	Madison	WI	Stipend - National Board certified teacher

10. ADDITIONAL SOURCES OF INCOME. List other sources from which you or your family received income of \$1,000 or more in 2007.

Source of income	City	State

11. ENTERTAINMENT AND GIFTS. List individuals and organizations that provided you with entertainment or gifts (more than \$50) in 2007.

Name of provider	City	State

12. HONORARIA AND EXPENSES. List, for 2007, sources of honoraria and payment of expenses related to your state government duties (more than \$50) not previously reported to the Government Accountability Board.

Payer	Approximate value of expenses	Amount of honorarium	Circumstances of receipt

I certify that the information contained in this Statement of Economic Interests is true, complete, and correct to the best of my knowledge, information, and belief. In the event this Statement of Economic Interests is filed prior my nomination or appointment, I certify that I will amend it within ten days of my nomination or appointment date if amendment is necessary to bring it into conformity with the true statement of my economic interests as of the date of my nomination or appointment. **If any part has been left blank, I have done so intentionally because there is nothing to report.**

Signature of person filing: Thomas Mulligan Date: 3/10/2008 Daytime phone #: 414. 324. 4108
E-mail address: mullt@wasm.k12.wi.us

The information sought in this form is required by §§19.43 and 19.44, *Wisconsin Statutes*. Failure to file a completed form may result in a forfeiture of up to \$500. Statements of Economic Interests are open for public inspection. The Government Accountability Board will notify you of the identity of any person who examines your Statement. In accordance with §15.04(1)(m), *Wisconsin Statutes*, the Government Accountability Board states that no personally identifiable information is likely to be used for purposes other than those for which it is collected.

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DATE: 3/19/2008FAX NUMBER SENDING TO: (608) 264-9319ATTENTION: Wisconsin Government Accountability BoardPHONE: (608) 266-8115FROM: Thomas MolligenPHONE: (414) 324-4108# OF PAGES TRANSMITTED (INCLUDING THIS PAGE): 4NOTES: _____

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